PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)	021164-000310US
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
Appl	cation Number 10/658,437		Filed September 8, 20	03
For CD56 POSITIVE HUMAN ADULT PANCREATIC ENDOCRINE PROGENITOR CELLS				
Art Unit 1651			Examiner Ruth A. Davis	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
	<u> </u>	<u>ee</u>	Small Entity Fee	
ĺ	One month (37 CFR 1.17(a)(1)) \$1	20	\$60	\$
ĺ	Two months (37 CFR 1.17(a)(2)) \$4	50	\$225	\$
	Three months (37 CFR 1.17(a)(3)) \$10	20	\$510	\$_510
	Four months (37 CFR 1.17(a)(4)) \$15	590	\$795	\$
	Five months (37 CFR 1.17(a)(5)) \$2°	160	\$1080	\$
$\boxtimes$	Applicant claims small entity status. See 37 CFR 1.27.			
	A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
$\boxtimes$	The Director has already been authorized to charge fees in this application to a Deposit Account.			
$\boxtimes$	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _ 20-1430 . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number <u>51,868</u>				
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
	/Beth L. Kelly/ March 5, 2007			
	Signature		Date	
	Beth L. Kelly, Reg. No. 51,868 Typed or printed name		415-576-0200 Telephone Number	
	Typed of printed name releptione Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
	Total offorms are submitted.			